Fill in this information to identify you	ır case:	
United States Bankruptcy Court for the: DISTRICT OF NEVADA		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this amended filin

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
I. Your full name		
Write the name that is o	· JOSE	ARACELI
government-issued pict identification (for examp	FIRST Name	First Name
your driver's license or	<u>R</u>	G
passport).	Middle Name	Middle Name
	MARTINEZ-CHICAS	DIAZ
Bring your picture identification to your me	Last Name eting	Last Name
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		ARACELI
have used in the last 8 years	First Name	First Name
Include your married or	Middle Name	Middle Name
Include your married or maiden names.		AGUILAR
maiden names.	Last Name	Last Name
3. Only the last 4 digits on your Social Security	f xxx - xx - <u>9</u> <u>3</u> <u>7</u> _	<u>0</u> xxx - xx - <u>7</u> <u>8</u> <u>8</u> <u>6</u>
number or federal Individual Taxpayer	OR	OR
Identification number	9xx - xx -	9xx - xx -

(ITIN)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	Any business names	I have not used any business names or EINs.	☐ I have not used any business names or EINs
	and Employer Identification Numbers		CORAZON A CORAZON BEHAVIOR HEAL
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and	Business name	Business name
	doing business as names	Business name	Business name
		EIN	EIN
			<u> </u>
	Where you live	LIN	If Debtor 2 lives at a different address:
		7430 BAROQUE COURT	
		Number Street	Number Street
		SUN VALLEY NV 89433 City State ZIP Code	City State ZIP Code
		WASHOE	Side Zii Godo
		County	County
		court will send any notices to you at this mailing address.	will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
9	art 2: Tell the Court A	About Your Bankruptcy Case	
	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see Noti- for Bankruptcy (Form 2010)). Also, go to the top of pa	
	are choosing to file under	Chapter 7	
		Chapter 11	
		Chapter 12	

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	otor 1 JOSE R MARTINE. Otor 2 ARACELI G DIAZ	Z-CHICAS		Case number (if	known)			
8.	How you will pay the fee	coui pay	Il pay the entire fee when I file my petition of the more details about how you may pay with cash, cashier's check, or money ordealf, your attorney may pay with a credit can	. Typically, if your. If your attorn	ou are pay ey is sub	ying the fee yourself, you may mitting your payment on your		
			ed to pay the fee in installments. If you viduals to Pay The Filing Fee in Installmer	•	-	and attach the Application for		
		By la than fee	I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter Filing Fee Waived (Official Form 103B) and file it with your petition.					
9.	Have you filed for	√ No						
	bankruptcy within the last 8 years?	☐ Yes						
		District _		_ When	DD / YYYY	Case number		
		District _				Case number		
		District						
		District _		_ When MM/D	D / YYYY	Case number		
10.	Are any bankruptcy cases pending or being	☑ No						
	filed by a spouse who is	Yes						
	not filing this case with you, or by a business	Debtor _		F	Relationsh	nip to you		
	partner, or by an	District _		When		Case number,		
	affiliate?			MM / D	D / YYYY	if known		
		Debtor		F	Relationsh	nip to you		
		District				Case number,		
		-				if known		
11.	Do you rent your residence?		Go to line 12. Has your landlord obtained an eviction	judgment again	st you?			
			No. Go to line 12.Yes. Fill out Initial Statement Abo and file it as part of this bankrupto		udgment	Against You (Form 101A)		

Debtor 1 JOSE R MARTINEZ ARACELI G DIAZ		-CHIC	CAS			_ Case numb	per (if known)			
Pa	rt 3:	Report About Ar	ıy Bı	ısine	sses You Own as a	a Sole P	roprietor			
12.	of any	re you a sole proprietor f any full- or part-time usiness?			Go to Part 4. Name and location of b	usiness				
		proprietorship is a			RM SERVICES NOT Name of business, if any	RTHERN	NEVADA			
		ss you operate as an al, and is not a			7430 BAROQUE CO	OURT				
	separat	e legal entity such as ration, partnership, or			Number Street					
					SUN VALLEY			NV	8943	33
	-	ave more than one			City			State	ZIP C	
;		oprietorship, use a re sheet and attach it petition.			Check the appropriate	box to de	scribe your busine	ess:		
					☐ Health Care Busi	ness (as d	efined in 11 U.S.	C. § 101(27A))		
					☐ Single Asset Rea	,		- ,	3))	
					Stockbroker (as o					
					☐ Commodity Broke ✓ None of the abov		ned in 11 U.S.C. §	§ 101(6))		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor</i> or a debtor as defined by 11 U.S.C. § 1182(1)?		cho are mos or if	a sma a sma st rece any o	filing under Chapter 11, to proceed under Subch Il business debtor or you nt balance sheet, statem If these documents do no	apter V so u are choos nent of ope ot exist, fol	that it can set applying to proceed upperations, cash-flow low the procedure	propriate deadli nder Subchapte w statement, and	nes. If yo r V, you m d federal in	u indicate that you nust attach your ncome tax return
	-	•	✓	No.	I am not filing under C	napter 11.				
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).			No.	I am filing under Chap the Bankruptcy Code.	ter 11, but	I am NOT a smal	II business debto	or accordi	ng to the definition in
				Yes.	I am filing under Chap Bankruptcy Code, and				Ū	
				Yes.	I am filing under Chap Bankruptcy Code, and			-	_	. ,
Pa	rt 4:	Report If You Ov	vn o	r Hav	e Any Hazardous F	Property	or Any Prop	erty That Ne	eds Imn	nediate Attention
14.	propert alleged immine	own or have any ty that poses or is to pose a threat of ent and identifiable		No Yes.	What is the hazard?					
	hazard to public health or safety? Or do you own any property that needs immediate attention?				If immediate attention	is needed,	why is it needed	?		
	For exa perisha livestoc			Where is the property?		0				
	a buildi repairs:	ng that needs urgent ?				Number	Street			
						City			State	ZIP Code

Debtor 1 JOSE R MARTINEZ-CHICAS
Debtor 2 ARACELI G DIAZ

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:
☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 JOSE R MAR otor 2 ARACELI G D	_	CHICAS Case number (if known)							
P	art 6: Answer Th	ese Quest	ions fo	or F	Reporting Pu	rpos	ses			
16.	What kind of debts do have?	you 16a	as "ir	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.						
		16b	 16b. Are your debts primarily business debts? Busine money for a business or investment or through the op No. Go to line 16c. Yes. Go to line 17. 							
		160	. State	the	type of debts yo	u owe	e that are not consumer or bus	sines	s debts.	
17.	Are you filing under Chapter 7?		No. I am not filing under Chapter 7. Go to line 18.							
	Do you estimate that a any exempt property is excluded and administrative expense are paid that funds will available for distribution to unsecured creditors	es I be on			•		•	-	xempt property is excluded and to distribute to unsecured creditors?	
18.	How many creditors do you estimate that you owe?		1-49 50-99 100-19 200-99				1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.	How much do you estimate your assets to be worth?	· 🛚	\$100,0	1-\$1 01-\$	0 100,000 5500,000 61 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much do you estimate your liabilities be?	s to	\$100,0	1-\$1 01-\$	0 100,000 5500,000 61 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

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Debtor 1 Debtor 2	JOSE R MARTINEZ- ARACELI G DIAZ	CHICAS	Case number (if known)				
Part 7:	Sign Below						
For you		I have examined this petition, and I declare und and correct.	der penalty of perjury that the information provided is true				
		•	ware that I may proceed, if eligible, under Chapter 7, 11, 12, and the relief available under each chapter, and I choose to				
		If no attorney represents me and I did not pay of fill out this document, I have obtained and reach	or agree to pay someone who is not an attorney to help me I the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of	of title 11, United States Code, specified in this petition.				
		•	derstand making a false statement, concealing property, or obtaining money or property by fraud in nection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, oth. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		X /s/ JOSE R MARTINEZ-CHICAS	X /s/ ARACELI G DIAZ				
		JOSE R MARTINEZ-CHICAS, Debtor 1	ARACELI G DIAZ, Debtor 2				

Executed on 12/22/2020

MM / DD / YYYY

Executed on 12/22/2020

MM / DD / YYYY

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Debtor 1 Debtor 2	JOSE R MARTINE ARACELI G DIAZ	Z-CHICAS	Case number (if know	n)					
For your a represente	ttorney, if you are ed by one	eligibility to proceed under Chapter	ed in this petition, declare that I have 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also	tes Code, and have explained the					
•	not represented by y, you do not need page.	the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies certify that I have no knowledge after an inquiry that the information in the schedules filed with the pe is incorrect.							
		X /s/ Nathan R. Zeltzer Signature of Attorney for Debtor		12/22/2020 MM / DD / YYYY					
		Nathan R. Zeltzer							
		Printed name The Law Office of Nathan R	2. Zeltzer, Ltd.						
		Firm Name 232 Court St.							
		Number Street							
		Reno	NV	89501					
		City	State	ZIP Code					
		Contact phone (775) 786-999	Email address <u>nrzbk</u>	@yahoo.com					
		5173	NV						
		Bar number	State	_					

Fill in this inf	ormation to id	dentify your	case and this fi	ling:		
Debtor 1	JOSE	R	MARTIN	NEZ-CHICAS		
Dobies 1	First Name	Middle Nar				
Debtor 2	ARACELI	G	DIAZ			
(Spouse, if filing)	First Name	Middle Nar	ne Last Name			
United States Ba	nkruptcy Court for	the: DISTRIC	T OF NEVADA			
Case number					☐ Chock	if this is an
(if known)					— • • • • • • • • • • • • • • • • • • •	ed filing
Official Form	106A/B					
Schedule A	B: Property	/				12/15
the asset in the ca filing together, bo sheet to this form	ategory where youth are equally re on the top of a	ou think it fits l sponsible for a ny additional	pest. Be as complet supplying correct in pages, write your na	e and accurate as formation. If more ime and case numb	et fits in more than one cat possible. If two married pe space is needed, attach a ser (if known). Answer eve	ople are separate ry question.
		,	,, <u></u>			
1. Do you own	or have any legal	or equitable i	nterest in any reside	ence, building, land	I, or similar property?	
No. Go						
Yes. Wr	nere is the propert	y?				
	-	-	for all of your entried to the state of the state that number 1.		_	\$0.00
Dort 2: Do	ooribo Vour V	ahialaa			•	
Part 2: De	scribe Your V	enicies				
•	. •	•	•	•	registered or not? Include cutory Contracts and Unexpir	•
3. Cars, vans, t	rucks, tractors, s	port utility vel	nicles, motorcycles			
□ No						
✓ Yes						
3.1.	CHEVDOLI		no has an interest in eck one.	the property?	Do not deduct secured clair amount of any secured clair	•
Make:	CHEVROLI	 _			Creditors Who Have Claim	
Model:	SILVERAD	0	Debtor 2 only		Current value of the	Current value of the
Year:	2014	— <u> </u>	!	r 2 only	entire property?	portion you own?
Approximate milea	ige:		At least one of the o	debtors and another	\$17,425.00	\$17,425.00
Other information: 2014 CHEVROL	ET SILVERADO)	Check if this is cor	nmunity property		
			(see instructions)	,, ,		
3.2.	CUDADU		no has an interest in	the property?	Do not deduct secured clair amount of any secured clair	
Make:	SUBARU	G	Deleteration 1		Creditors Who Have Claim	
Model:	LEGACY		Debtor 2 only		Current value of the	Current value of the
Year:	2011	— <u> </u>		r 2 only	entire property?	portion you own?
Approximate milea	ge:	— <u> </u>	At least one of the o	debtors and another	\$5,832.00	\$5,832.00
Other information:	FOACY	-	Chaple if the !- !-			
2011 SUBARU L	LEGACY		Check if this is cor (see instructions)	nmunity property		

Debto Debto		R MARTINEZ-CHICA CELI G DIAZ		se number (if known)	
• • •	l: ximate mileag	TOYOTA TACOMA 1997	Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Do not deduct secured claim amount of any secured claim Creditors Who Have Claim Current value of the entire property? \$3,429.00	ims on Schedule D:
	information: TOYOTA TA	ACOMA	Check if this is community property (see instructions)		
<i>E</i>			Vs and other recreational vehicles, other vehonal watercraft, fishing vessels, snowmobiles, m		
4.1. Make:		SSR MOTORSPORTS	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clai amount of any secured cla Creditors Who Have Claim	ims on Schedule D:
Model Year:		2019	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	information:	Deponte	At least one of the debtors and another	\$1,800.00	\$1,800.00
2019	SSR MOTO	KSPUKIS	Check if this is community property (see instructions)		
			u own for all of your entries from Part 2, inclior Part 2. Write that number here		\$28,486.00
Par			al and Household Items	-	
			e interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examples: Ma	ods and furnishings jor appliances, furniture,	linens, china, kitchenware		
L E	☑ No ☑ Yes. Desc	cribe LIVING ROOM	I FURNITURE, DINING ROOM SET, KITC	HENWARE	\$1,500.00
E	· mu ⊒ No	sic collections; electronic	io, video, stereo, and digital equipment; compute devices including cell phones, cameras, media		J
5	y Yes. Desc	tribe TV, 2 CELL PI	HONES		\$500.00
	•	tiques and figurines; pain	tings, prints, or other artwork; books, pictures, od collections; other collections, memorabilia, col	-	
<u> </u>	☑ No ☐ Yes. Desc	ribe]
	Examples: Spo		ise, and other hobby equipment; bicycles, pool t try tools; musical instruments	ables, golf clubs, skis;	
<u> </u>	☑ No ☑ Yes. Desc	ribe			

Deb Deb	tor 1 tor 2	JOSE R MAI	RTINEZ-CHIO DIAZ	Case number (if known)			
10.			es, shotguns, a	ammunition, and related equipment			
	☐ No ✓ Yes	s. Describe	9 MM GLOC	СК	\$500.00		
11.			clothes, furs, le	ather coats, designer wear, shoes, accessories			
	☐ No ✓ Yes	s. Describe	USED CLOT	THING	\$500.00		
12.	Jewelry Example No	•	•	e jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,			
		s. Describe					
13.	Examp	rm animals /es: Dogs, cats	, birds, horses				
	✓ No ☐ Yes	s. Describe					
14.	Any ot	-	nd household	items you did not already list, including any health aids you	'		
	✓ No ☐ Yes	s. Give specific	;		1		
	info	ormation					
15.				entries from Part 3, including any entries for pages you have per here	\$3,000.00		
Pa	art 4:	Describe '	Your Finan	cial Assets			
Doy	ou owr	or have any le	egal or equital	ble interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.		
16.	Cash Example	les: Money you petition	have in your v	vallet, in your home, in a safe deposit box, and on hand when you file your			
	✓ No	3		Cash:			
17.	Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.						
	□ No ✓ Yes	3		Institution name:			
	17	.1. Checking	account:	Checking account- US BANK 8106	\$2,626.00		
	17	.2. Checking	account:	Checking account- BANK OF AMERICA	\$642.00		
	17	.3. Checking	account:	Checking account- US BANK 1625	\$0.00		
	17	.4. Savings a	account:	Savings account BANK OF AMERICA	\$0.00		

	tor 1 tor 2	JOSE R MARTINI ARACELI G DIAZ		
			Case number (if known)	
18.			ublicly traded stocks estment accounts with brokerage firms, money market accounts	
	✓ No ☐ Yes	5	Institution or issuer name:	
19.	-	•	and interests in incorporated and unincorporated businesses, including nership, and joint venture	
	info	s. Give specific rmation about	Name of entity: % of ownership:	
20.	Negotia	ment and corporate	e bonds and other negotiable and non-negotiable instruments ude personal checks, cashiers' checks, promissory notes, and money orders. are those you cannot transfer to someone by signing or delivering them.	
	info	s. Give specific ormation about m	Issuer name:	
21.		nent or pension acc les: Interests in IRA, profit-sharing pla	ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or	
	_	s. List each ount separately. T	ype of account: Institution name:	
22.	Your sh Exampl		payments posits you have made so that you may continue service or use from a company landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
	☑ No	S	Institution name or individual:	
23.	☑ No	`	specific periodic payment of money to you, either for life or for a number of years) Issuer name and description:	
24.		ts in an education IF C. §§ 530(b)(1), 529/	RA, in an account in a qualified ABLE program, or under a qualified state tuition property, and $529(b)(1)$.	gram.
	✓ No ☐ Yes	S	Institution name and description. Separately file the records of any interests. 11 U.S.C.	§ 521(c)
25.		equitable or future exercisable for you	interests in property (other than anything listed in line 1), and rights or ur benefit	
	_	s. Give specific srmation about them		
26.			marks, trade secrets, and other intellectual property; names, websites, proceeds from royalties and licensing agreements	
		s. Give specific srmation about them		
27.	Exampl		other general intangibles , exclusive licenses, cooperative association holdings, liquor licenses, professional licens	es
		s. Give specific		

	otor 1 JOSE R MARTINEZ-CHICAS otor 2 ARACELI G DIAZ Case number (if		
DCD	ARACELI G DIAZ Case number (if	known)	
Mor	ney or property owed to you?	p D	urrent value of the ortion you own? o not deduct secured aims or exemptions.
28.	Tax refunds owed to you		
	No Yes. Give specific information about them, including whether you already filed the returns and the tax years	Federal:_ State: _ Local: _	
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce set ✓ No	tlement, property s	ettlement
		mony:	
	Ма	intenance:	
	Su	pport:	
	Div	orce settlement: _	
	Pro	perty settlement:_	
31	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, compensation, Social Security benefits; unpaid loans you made to someone else ✓ No ☐ Yes. Give specific information Interests in insurance policies	workers'	
31.	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, on the insurance company of each policy and list its value		ender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are current entitled to receive property because someone has died	tly	
	✓ No Yes. Give specific information	_	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for pay Examples: Accidents, employment disputes, insurance claims, or rights to sue ✓ No ☐ Yes. Describe each claim	yment	
34.	rights to set off claims	or and	
	✓ No Yes. Describe each claim		

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35. Any financial assets you did not already list No		tor 1 tor 2	JOSE R MA		HICAS Case number (if known)	
No	35					
Yes. Give specific information		•	a	you ala lio	i an saay not	
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned Portion you own? Do not deduct secured claims or exemptions. 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, moderns, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No			. Give specif	fic informatio	n	
37. Do you own or have any legal or equitable interest in any business-related property?	36.					\$3,608.00
No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No	P	art 5:	Describe A	Any Busin	ess-Related Property You Own or Have an Interest In. List a	any real estate in Part 1.
Yes. Go to line 38. Current value of the portion you own?	37.	Do you	own or have	any legal o	r equitable interest in any business-related property?	
Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No Yes. Describe 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No Yes. Describe USED HAND TOOLS, POWER TOOLS, COMPRESOR \$2,200.00 41. Inventory No Yes. Describe 24. Interests in partnerships or joint ventures No Yes. Describe Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		_				
38. Accounts receivable or commissions you already earned No		✓ Yes	. Go to line 3	38.		
 No						portion you own? Do not deduct secured
yes. Describe 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No yes. Describe 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No Yes. Describe USED HAND TOOLS, POWER TOOLS, COMPRESOR \$2,200.00 41. Inventory No Yes. Describe 42. Interests in partnerships or joint ventures No Yes. Describe Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations No N	38.	Accoun	ts receivable	e or commis	sions you already earned	
39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No						
Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No Yes. Describe USED HAND TOOLS, POWER TOOLS, COMPRESOR \$2,200.00 41. Inventory No Yes. Describe Yes. Describe 42. Interests in partnerships or joint ventures No Yes. Describe Name of entity: 43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		☐ Yes	. Describe			
Yes. Describe 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No Yes. Describe 41. Inventory No Yes. Describe 42. Interests in partnerships or joint ventures No Yes. Describe 43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No No No No No No No N	39.		es: Business	-related com	outers, software, modems, printers, copiers, fax machines, rugs, telephones,	
40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No Yes. Describe USED HAND TOOLS, POWER TOOLS, COMPRESOR \$2,200.00 41. Inventory No Yes. Describe 42. Interests in partnerships or joint ventures No Yes. Describe Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		سنا				
No Yes. Describe USED HAND TOOLS, POWER TOOLS, COMPRESOR \$2,200.00 41. Inventory No Yes. Describe 42. Interests in partnerships or joint ventures % of ownership: 43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No No No No No No No N		☐ Yes	. Describe			
Yes. Describe USED HAND TOOLS, POWER TOOLS, COMPRESOR \$2,200.00 41. Inventory No Yes. Describe 42. Interests in partnerships or joint ventures No Yes. Describe % of ownership: 43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	40.	Machine	ery, fixtures,	, equipment,	supplies you use in business, and tools of your trade	
41. Inventory No Yes. Describe 42. Interests in partnerships or joint ventures No Yes. Describe Name of entity: ** % of ownership: 43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?						
 ✓ No Yes. Describe 42. Interests in partnerships or joint ventures ✓ No Yes. Describe Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ✓ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? 		✓ Yes	. Describe	USED HAI	ND TOOLS, POWER TOOLS, COMPRESOR	\$2,200.00
 Yes. Describe 42. Interests in partnerships or joint ventures ✓ No Yes. Describe Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ✓ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? 	41.	Invento	ry			
 Yes. Describe 42. Interests in partnerships or joint ventures ✓ No Yes. Describe Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ✓ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? 		☑ No				
 No			. Describe			
Yes. Describe Name of entity: 43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	42.	Interest	s in partners	ships or join	t ventures	
43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		س	. Describe	Name of e	ntity: % of ownershi	o:
No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ No	43.	_				
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?			,	<u> </u>	·	
				sts include p	personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
				Describe		

Deb Deb	tor 1 tor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ Case number (if known)	
44.	Any bus	siness-related property you did not already list	
	✓ No ☐ Yes	. Give specific information.	
45.		dollar value of all of your entries from Part 5, including any entries for pages you have d for Part 5. Write that number here	\$2,200.00
Pa		Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a f you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	_	Go to Part 7. Go to line 47.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm an	nimals es: Livestock, poultry, farm-raised fish	
	✓ No Yes]
48.	Crops	either growing or harvested	_
	_	. Give specific rmation]
49.	Farm ar	nd fishing equipment, implements, machinery, fixtures, and tools of trade	
	□ No ✓ Yes	2017 BOBCAT SKID STEER	\$25,900.00
50.	Farm ar	nd fishing supplies, chemicals, and feed	_
	✓ No ☐ Yes		
51.	Any far	m- and commercial fishing-related property you did not already list	_
	_	. Give specific rmation]
52.		dollar value of all of your entries from Part 6, including any entries for pages you have	\$25,900.00

Debtor 1 Debtor 2		JOSE R MARTINEZ-CHICAS ARACELI G DIAZ				
Р	art 7:	Describe All Property You Own or Have an I	nterest in That You [Did Not List Abov	⁄e	
53.	•	u have other property of any kind you did not already listeles: Season tickets, country club membership	st?			
	✓ No	es. Give specific information.				
54.	Add th	ne dollar value of all of your entries from Part 7. Write the	nat number here		•	\$0.00
Р	art 8:	List the Totals of Each Part of this Form				
55.	Part 1:	: Total real estate, line 2			-	\$0.00
56.	Part 2:	: Total vehicles, line 5	\$28,486.00			
57.	Part 3:	: Total personal and household items, line 15	\$3,000.00			
58.	Part 4:	: Total financial assets, line 36	\$3,608.00			
59.	Part 5:	: Total business-related property, line 45	\$2,200.00			
60.	Part 6	: Total farm- and fishing-related property, line 52	\$25,900.00			
61.	Part 7	: Total other property not listed, line 54	+\$0.00			
62.	Total p	personal property. Add lines 56 through 61	\$63,194.00	Copy personal property total	+	\$63,194.00
63.	Total o	of all property on Schedule A/B. Add line 55 + line 62			[\$63,194.00

	formation to ic	entify your	case:			
Debtor 1	JOSE	R	MARTINE	EZ-CI	HICAS	
Debtor 2	First Name ARACELI	Middle Nam G	ne Last Name DIAZ			
(Spouse, if filing)		Middle Nam				
United States Ba	ankruptcy Court for	the: DISTRIC	T OF NEVADA			☐ Check if this is an
Case number (if known)						amended filing
Official Form	106C					
Schedule C	: The Prope	rty You C	laim as Exemp	ot		04/19
Using the property	you listed on Sch	edule A/B: Prop o this page as n	perty (Official Form 106	6A/B)	as your source, list the	esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages,
is to state a spec exempted up to the receive certain be exemption of 100	ific dollar amount he amount of any enefits, and tax-e % of fair market v	as exempt. A applicable star cempt retireme value under a la	Iternatively, you may itutory limit. Some ex ent fundsmay be unl	claim xempt limited emptio	n the full fair market vions-such as those d in dollar amount. Hen to a particular doll	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	erty You Cla	aim as Exempt			
1. Which set of	exemptions are y	ou claiming?	Check one only.	even i	f your spouse is filing	with vou.
		_	nkruptcy exemptions.		, ,	, , , , , , , , , , , , , , , , , , , ,
_	claiming federal e	kemptions. 11	U.S.C. § 522(b)(2)			
2. For any prop	erty you list on S	chedule A/B th	hat you claim as exen	npt, fi	II in the information	below.
Brief description Schedule A/B tha			Current value of the portion you own		ount of the nption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		ck only one box for n exemption	
B : ()						
			\$17,425.00	$\overline{\mathbf{V}}$	\$11,451.00	Nev. Rev. Stat. § 21.090(1)(f), (p)
2014 CHEVROL		1	\$17,425.00		100% of fair market	Nev. Rev. Stat. § 21.090(1)(f), (p)
2014 CHEVROL		•	<u>\$17,425.00</u>			Nev. Rev. Stat. § 21.090(1)(f), (p)
2014 CHEVROL Line from Schedul Brief description:	de A/B:		\$17,425.00 \$5,832.00		100% of fair market value, up to any applicable statutory limit \$5,832.00	Nev. Rev. Stat. § 21.090(1)(f), (p) Nev. Rev. Stat. § 21.090(1)(f), (p)
Brief description: 2014 CHEVROL Line from Schedul Brief description: 2011 SUBARU I Line from Schedul	le A/B:				100% of fair market value, up to any applicable statutory limit	

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 **ARACELI G DIAZ** Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$3,429.00 \$3,429.00 Nev. Rev. Stat. § 21.090(1)(z) \square 1997 TOYOTA TACOMA 100% of fair market value, up to any Line from Schedule A/B: 3.3 applicable statutory limit Brief description: \$1,800.00 \$1,800.00 Nev. Rev. Stat. § 21.090(1)(z) $\overline{\mathbf{Q}}$ 2019 SSR MOTORSPORTS 100% of fair market value, up to any Line from Schedule A/B: 4.1 applicable statutory limit Brief description: \$1,500.00 \$1,500.00 Nev. Rev. Stat. § 21.090(1)(b) $\overline{\mathbf{Q}}$ LIVING ROOM FURNITURE, DINING ROOM 100% of fair market **SET, KITCHENWARE** value, up to any applicable statutory Line from Schedule A/B: limit Brief description: \$500.00 \$500.00 Nev. Rev. Stat. § 21.090(1)(b) \square TV, 2 CELL PHONES 100% of fair market value, up to any Line from Schedule A/B: 7 applicable statutory limit Brief description: Nev. Rev. Stat. § 21.090(1)(i) \$500.00 \$500.00 $\overline{\mathbf{Q}}$ 9 MM GLOCK 100% of fair market value, up to any Line from Schedule A/B: 10 applicable statutory limit Brief description: \$500.00 \$500.00 Nev. Rev. Stat. § 21.090(1)(b) $\overline{\mathbf{Q}}$ **USED CLOTHING** 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$2,626.00 \$0.00 Nev. Rev. Stat. § 21.090(1)(g) \square Checking account- US BANK 8106 100% of fair market (1st exemption claimed for this asset) value, up to any Line from Schedule A/B: 17.1 applicable statutory limit Brief description: \$2,626.00 \$2,626.00 Nev. Rev. Stat. § 21.090(1)(z) $\overline{\mathbf{A}}$ Checking account- US BANK 8106 100% of fair market (2nd exemption claimed for this asset) value, up to any Line from Schedule A/B: 17.1 applicable statutory limit Brief description: \$642.00 \$0.00 Nev. Rev. Stat. § 21.090(1)(g) $\overline{\mathbf{Q}}$ Checking account- BANK OF AMERICA 100% of fair market

(1st exemption claimed for this asset)

Line from Schedule A/B: 17.2

value, up to any applicable statutory

limit

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Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 **ARACELI G DIAZ** Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property exemption you claim the portion you own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$642.00 \$642.00 Nev. Rev. Stat. § 21.090(1)(z) $\overline{\mathbf{V}}$ Checking account- BANK OF AMERICA 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 17.2 limit Brief description: \$340.00 \$340.00 Nev. Rev. Stat. § 21.090(1)(k) \square **ALLSTATE** 100% of fair market value, up to any Line from Schedule A/B: ____31 applicable statutory limit Brief description: \$2,200.00 Nev. Rev. Stat. § 21.090(1)(d) \$2,200.00 $\overline{\mathbf{Q}}$ **USED HAND TOOLS, POWER TOOLS,** 100% of fair market **COMPRESOR** value, up to any applicable statutory Line from Schedule A/B: limit Brief description: \$25,900.00 \$7,891.00 Nev. Rev. Stat. § 21.090(1)(d) $\overline{\mathbf{A}}$ 2017 BOBCAT SKID STEER 100% of fair market value, up to any Line from Schedule A/B: 49 applicable statutory limit

	ormation to ider			40		
Debtor 1	JOSE First Name	R Middle Name	MARTINEZ-CHIC Last Name	,AS		
Debtor 2	ARACELI	G	DIAZ			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the	E: DISTRICT OF	NEVADA			
Case number					☐ Check if this is	s an
(if known)					amended filing	g
Official Form	106D					
Schedule D:	Creditors W	ho Have Cla	aims Secured by	Property		12/15
1. Do any credit No. Che Yes. Fill Part 1: Lis 2. List all securclaim, list the creditor has a much as poss creditor's name	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims					
2.1		Describe the	e property that claim:	\$18,009.00	\$25,900.00	
BB&T Creditor's name		2017 ВОВ	CAT SKIT STEER			
PO BOX 1704 Number Street						
CLEMMONS	NC 27012	Conting		Check all that apply.		
CLEMMONS City	NC 27012 State ZIP Code	☐ Unliquid ☐ Disputed				
Who owes the deb	ot? Check one.		en. Check all that apply.			
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien)						
Debtor 1 and D	-	☐ Judame	nt lien from a lawsuit	conamic s nem		
_	the debtors and anot	hor —	ncluding a right to offset)			
to a communit						
Date debt was inc	urred <u>2/2018</u>	Last 4 digits	s of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$18,009.00

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Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ			Case number (if known)			
Part 1:	Additional Page After listing any entries sequentially from the pr	on this page, number them evious page.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
United Federal Credit Union Creditor's name 2807 S. State Street Number Street		Describe the property that secures the claim: 2014 CHEVROLET SILVERADO	\$5,974.00	\$17,425.00		
Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least Check in	State ZIP Code he debt? Check one. only	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, must be under the such as tax lien, must be under the lien from a lawsuit Other (including a right to offset)	s mortgage or secured	l car Ioan)		
Date debt w	as incurred 7/2015	Last 4 digits of account number				

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$23,983.00

\$5,974.00

				_		
Fill in this inf	ormation to id	entify your c	ase:			
Debtor 1	JOSE	R	MARTINEZ-CHICAS			
	First Name	Middle Name	Last Name			
Debtor 2	ARACELI	G	DIAZ			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for	the: DISTRICT	OF NEVADA			
Case number (if known)					Check if this is a amended filing	ın
Official Form	106E/F					
Schedule E/	F: Creditors	S Who Have	e Unsecured Claims			12/15
If more space is n to this page. On t	eeded, copy the I he top of any add	Part you need, fi litional pages, w	claims that are listed in Schedule III it out, number the entries in the rite your name and case number secured Claims	boxes on the left. A		
1. Do any credit	tors have priority	unsecured clair	ns against you?			
☐ No. Go t	o Part 2.					
✓ Yes.						
claim. For each show both price more space is claim, list the	ch claim listed, ide prity and nonpriorit needed for priorit other creditors in F	entify what type o y amounts. As n y unsecured clair Part 3.	creditor has more than one priority of claim it is. If a claim has both prioring huch as possible, list the claims in a ms, fill out the Continuation Page of the instructions for this form in the instructions.	rity and nonpriority ame Iphabetical order acco Part 1. If more than o	ounts, list that clair rding to the credito ne creditor holds a Priority	n here and or's name. If particular Nonpriority
					amount	amount
2.1				\$14,000.00	\$14,000.00	\$0.00
IRS			Last 4 digits of account number			
Priority Creditor's Nam PO Box 7346	e		When was the debt incurred?			
Number Street				2010	_	
			As of the date you file, the claim	is: Check all that app	lly.	
District delication		40404	Contingent Unliquidated			
Philadelphia City		19101 ZIP Code	Disputed			
Who incurred the			Type of PRIORITY unsecured cla	aim:		
Debtor 1 only			☐ Domestic support obligations			
☐ Debtor 2 only ☐ Debtor 1 and □	Debtor 2 only		Taxes and certain other debts Claims for death or personal in		ent	
	the debtors and a	nother	intoxicated	ijary writie you were		
ш	claim is for a com	munity debt	Other. Specify			
Is the claim subject	ct to offset?					
✓ No Yes						

Debtor 1 Debtor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
☐ No ✓ Ye 4. List all If a cree type of	of your nonpriority unsecured claims ditor has more than one nonpriority unsec claim it is. Do not list claims already incl	claims against you? Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2. Total claim
		\$2,275.00 Last 4 digits of account number When was the debt incurred? 6/2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least Check i	State ZIP Code ed the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Collecting for -NORTHERN NEVADA MEDICAL CENTER
Nonpriority Cre PO BOX 17 Number S SALT LAK City	71374 Street EE CITY UT 84117 State ZIP Code ed the debt? Check one.	\$214.00 Last 4 digits of account number When was the debt incurred? 2/2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations origins out of a congretion agreement or diverse
Debtor 2 Debtor 1 Debtor 1 At least Check i	•	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collecting for - VERITY FITNESS RENO

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$74.00
AMSHERCOLLECTIONSERVICES Nonpriority Creditor's Name	Last 4 digits of account number	
4524 SOUTHLAKE PARKWAY STE. 15	When was the debt incurred? 1/2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
BIRMINGHAM AL 35243	Disputed	
BIRMINGHAM AL 35243 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Collecting for -DISH NETWORK	
Is the claim subject to offset?	-	
☑ No		
Yes		
4.4		\$1.00
BARCLAYS BANK DELAWARE	Last 4 digits of account number	Ψ1.00
Nonpriority Creditor's Name	When was the debt incurred? 1/2013	
PO BOX 8803 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
WILMINGTON DE 19899	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No You		
Yes		
4.5		\$395.00
Capital One	Last 4 digits of account number	-
Nonpriority Creditor's Name	When was the debt incurred? 4/2018	
PO Box 30285 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$500.00
CASH 1 LOANS Nonpriority Creditor's Name	Last 4 digits of account number	
5890 S. VIRGINIA BLDG. 1	When was the debt incurred? 2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
RENO NV 89502 City State ZIP Code	— Taras of NONDRIORITY and a count of all alian	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
— Object Wilder alabories from a community of the	Other. Specify	
ш '	Credit Card	
Is the claim subject to offset? ✓ No		
Yes		
4.7		\$428.00
Cavalry Portfolio Services	Last 4 digits of account number	
Nonpriority Creditor's Name 500 Summit Lake Drive, STe 400	When was the debt incurred? 12/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Valhalla NY 10595		
City State ZIP Code Who incurred the debt3 Check one	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Collecting for -SYNCHRONY BANK	
Is the claim subject to offset?		
No You		
Yes		
4.8		\$528.00
CB INDIGO/GF	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 2/2020	
PO BOX 4499 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
BEAVERTON OR 97076	Disputed	
BEAVERTON OR 97076 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Croan dara	
✓ No		
☐ Yes		

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the	m sequentially from the	Total claim
previous page.		
4.9		\$1,568.00
CHECK CITY Nonpriority Creditor's Name	Last 4 digits of account number	
10590 N. MCCARRAN BLVD	When was the debt incurred? 2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
RENO NV 89503 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Non-Purchase Money	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.10		\$198.00
CITICARDS CBNA	Last 4 digits of account number	·
Nonpriority Creditor's Name	When was the debt incurred? 3/2020	
PO BOX 6241 Number Street	As of the date you file, the claim is: Check all that apply.	
IBS CDV DISPUTES	_	
	Unliquidated	
SIOUX FALLS SD 57117	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.11		****
	Last A Parks of account number	\$935.00
COMENITYBANK/VICTORIASSECRET Nonpriority Creditor's Name	Last 4 digits of account number	
PO BOX 182789	When was the debt incurred? 7/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
COLUMBUS OH 43218		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$480.00
COX COMMUNICATIONS	Last 4 digits of account number	\$400.00
Nonpriority Creditor's Name	When was the debt incurred? 2019	
PO BOX 1259 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
OAKS PA 19456	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify UNSECURED DEBT	
Is the claim subject to offset?	CROLOGRED DED!	
☑ No		
Yes		
4.13		
	Look A. Patter of an army to some loop	\$308.00
Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 98872	When was the debt incurred? 2/2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Las Vegas NV 89193		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a congration agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		
Yes		
4.14		\$10,184.00
DEPT OF ED/NAVIENT	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 2/2015	
123 JUSTISON STREET 3RD FLOOR Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
WILMINGTON DE 19801	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.		
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
✓ No		
☐ Yes		

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the	m sequentially from the	Total claim
previous page.		
4.15		\$3,634.00
Discover Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	
PO BOX 15316	When was the debt incurred? 4/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
WILMINGTON DE 19850 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
☑ No ☐ Yes		
4.16		\$7,884.00
DIVERSIFIED ADJ SVC	Last 4 digits of account number	
Nonpriority Creditor's Name 600 COON RAPIDS BLVD NW	When was the debt incurred? 8/2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
COON RAPIDS MN 55433	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Collecting for -SPRINT	
Is the claim subject to offset?	-	
☑ No		
Yes		
4.17		\$490.00
First Premier Bank	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 1/2013	
3820 N LOUISE AVE.	<u></u>	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
010117 EALLO OD EZ40Z	Disputed	
SIOUX FALLS SD 57107 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
— Object Wilder alabasis for a community data	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ✓ No		
✓ Yes		

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.		Total claim
4.18		\$13,092.00
FLEXIABLITY CAPITAL	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 2019	
1501 BROADWAY STE. 1511 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
NEW YORK NY 10036	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No		
Yes		
4.19		*
		\$4,407.00
Nonpriority Creditor's Name	Last 4 digits of account number	
1750 HARDY OAK STE. 104	When was the debt incurred? 2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
ITHACA NE 68033		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No No		
Yes		

Debtor 1	JOSE R MARTINEZ-CHICAS					
Debtor 2	ARACELI G DIAZ	Case number (if known)				
Part 2:	Your NONPRIORITY Unsecured Claims Continuation Page					
After listin	ng any entries on this page, number the page.	m sequentially from the	Total claim			
4.20			\$1,172.00			
Hospital	Collection Services	Last 4 digits of account number				
Nonpriority C	Creditor's Name	When was the debt incurred? 5/2017				
PO BOX 8	Street	As of the date you file, the claim is: Check all that apply.				
Nullibei	Silect	_ ☐ Contingent				
		Unliquidated				
DENO	NV 00504	Disputed				
RENO City	NV 89504 State ZIP Code	Type of NONPRIORITY unsecured claim:				
-	red the debt? Check one.	Student loans				
_	1 only	Obligations arising out of a separation agreement or divorce				
_	2 only	that you did not report as priority claims				
뜨	1 and Debtor 2 only st one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts				
ш		Other. Specify				
ш	if this claim is for a community debt	Collecting for -SIERRA EMERGENCY PHYS.				
	n subject to offset?					
✓ No ☐ Yes						
	TING FOR NO. NV EMERGENCY PH	IYS				
	THIS I SIX INS. IN EMERGENS I III					
4.21			\$0.00			
	A. GELLER, ESQ.	Last 4 digits of account number				
	creditor's Name VEGAS BLVD. S., SUITE 240	When was the debt incurred? 11/2020				
Number	Street	As of the date you file, the claim is: Check all that apply.				
		_ Contingent				
		Unliquidated				
LAS VEG	AS NV 89101	Disputed				
City	State ZIP Code	Type of NONPRIORITY unsecured claim:				
	red the debt? Check one.	Student loans				
느	1 only	Obligations arising out of a separation agreement or divorce				
	· 2 only · 1 and Debtor 2 only	that you did not report as priority claims				
<u> </u>	st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
ш	if this claim is for a community debt					
ш	n subject to offset?	ARBITION TO THADDLEE GERALING GEART REGIMEN GENE				
✓ No	,					
☐ Yes						

Debtor 1 Debtor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ		
Debioi 2	ARACELI G DIAZ	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	g any entries on this page, number the age.	em sequentially from the	Total claim
4.22			\$1,363.00
MIDLAND	CREDIT MANAGEMENT	Last 4 digits of account number	
Nonpriority C PO BOX	reditor's Name	When was the debt incurred? 2016	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		☐ Unliquidated ☐ Disputed	
LOS ANG	State ZIP Code		
City Who incur	red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor	•	Student loans Obligations arising out of a separation agreement or divorce	
Debtor	•	that you did not report as priority claims	
	1 and Debtor 2 only tone of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
_	if this claim is for a community debt	Other. Specify	
_	n subject to offset?	Collecting for -BARCLAYS BANK	
✓ No	in subject to onset:		
Yes			
COLLECT	TING FOR SYNCHRONY BANK		
4.23			\$35,126.00
	MEDICAID	Last 4 digits of account number	\$33,120.00
	reditor's Name	When was the debt incurred? 2019	
PO BOX 3	30042 Street	As of the date you file, the claim is: Check all that apply.	
Number	Sueet	_ Contingent	
		Unliquidated	
RENO	NV 89520	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
☐ Debtor ☐ Debtor	•	Obligations arising out of a separation agreement or divorce	
	1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	t one of the debtors and another	Other. Specify	
☐ Check	if this claim is for a community debt	Medical	
	n subject to offset?		
☑ No			
☐ Yes			

bebtor 1 JOSE R MARTINEZ-CHICAS ARACELI G DIAZ Case number (if known)					
Part 2: Your NONPRIORITY Unsecured Claims Continuation Page					
After listing any entries on this page, num previous page.	nber them sequentially from the	Total claim			
4.24		\$35,126.00			
NEVADA MEDICAID	Last 4 digits of account number				
Nonpriority Creditor's Name	When was the debt incurred? 10/2020				
PO BOX 30042 Number Street	As of the date you file, the claim is: Check all that apply.				
- Cited	Contingent				
	Unliquidated				
RENO NV 89520	Disputed				
City State ZIP Code	Type of NONPRIORITY unsecured claim:				
Who incurred the debt? Check one.	☐ Student loans				
Debtor 1 only	Obligations arising out of a separation agreement or divorce				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	that you did not report as priority claims				
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
☐ Check if this claim is for a community	Other. Specify Non-Purchase Money				
Is the claim subject to offset?	Non i distillate money				
✓ No					
Yes					
4.25					
4.25		\$1,227.00			
Northern Nevada Medical Center Nonpriority Creditor's Name	Last 4 digits of account number				
PO BOX 740433	When was the debt incurred? 2018				
Number Street	As of the date you file, the claim is: Check all that apply.				
	Unliquidated Disputed				
LOS ANGELES CA 90074					
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
Debtor 1 only	Student loans				
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
✓ Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts				
At least one of the debtors and another	Other. Specify				
☐ Check if this claim is for a community	debt Medical				
Is the claim subject to offset?					
✓ No ✓ Yes					
Yes					
4.26		\$630.00			
ONLINE INFORMATIO SERVICES	Last 4 digits of account number	<u> </u>			
Nonpriority Creditor's Name	When was the debt incurred? 12/2019				
PO BOX 1489 Number Street	As of the date you file, the claim is: Check all that apply.				
	Contingent				
	Unliquidated				
WINTERVILLE NC 28590	Disputed				
City State ZIP Code	Type of NONPRIORITY unsecured claim:				
Who incurred the debt? Check one.	Student loans				
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce				
Debtor 1 and Debtor 2 only	that you did not report as priority claims				
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify				
Check if this claim is for a community					
Is the claim subject to offset?	.				
☑ No					
☐ Yes					

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.27		\$1,574.00
PLAIN GREEN LOANS Nonpriority Creditor's Name	Last 4 digits of account number	
93 MAĆK ROAD STE. 600	When was the debt incurred? 2019	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
BOX ELDER MT 59521	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Non-Purchase Money	
Is the claim subject to offset?		
☑ No ☐ Yes		
Yes		
4.28		\$365.00
RESURGENT/LVNV FUNDING	Last 4 digits of account number	-
Nonpriority Creditor's Name PO BOX 3038	When was the debt incurred? 12/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
EVANSVILLE IN 47730		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a consection agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collecting for - STERLING JEWELERS INC.	
Is the claim subject to offset? ✓ No		
Yes		
4.29		\$359.00
SECURITY FINANCE Nonpriority Creditor's Name	Last 4 digits of account number	
PO BOX 1893	When was the debt incurred? 3/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
SPARTANBURG SC 29304 City State ZIP Code	Type of NONERIORITY unsecured claim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No		
□ Yes		

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ	Case number (if known)	
Part 2: Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listing any entries on this page, number the	m sequentially from the	Total claim
previous page.		
4.30		\$1,330.00
SYNCB/CHEVRON Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 965015	When was the debt incurred? 4/2003	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Orlando FL 32896 City State ZIP Code	—	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
— Object Matter states to fee a community state	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
☑ No ☐ Yes		
4.31		\$609.00
THE BANK OF MISSOURI	Last 4 digits of account number	
Nonpriority Creditor's Name PO BOX 85710	When was the debt incurred? 2/2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
SIOUX FALLS SD 57118		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.32		\$1,130.00
UPLIFT INC.	Last 4 digits of account number	
Nonpriority Creditor's Name 801 EL CAMINO REAL	When was the debt incurred? 2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
MENLO PARK CA 94025	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

Debtor 1 Debtor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ	Case number (if known)		
	Case Hallison (II MIOWII)			
Part 2:	Your NONPRIORITY Unsec	ured Claims Continuation Page		
After listin	g any entries on this page, number tl age.	nem sequentially from the	Total claim	
4.33			\$8,689.00	
US BANK		Last 4 digits of account number		
Nonpriority C PO BOX 1	reditor's Name	When was the debt incurred? 11/2017		
Number	Street	As of the date you file, the claim is: Check all that apply.		
		Contingent		
		Unliquidated Disputed		
SAINT LC	OUIS MO 63166 State ZIP Code	_ _ '		
City Who incur	red the debt? Check one.	Type of NONPRIORITY unsecured claim:		
☐ Debtor	•	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce		
Debtor		that you did not report as priority claims		
	1 and Debtor 2 only tone of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts		
_	if this claim is for a community debt	✓ Other. Specify Credit Card		
_	n subject to offset?	Ordan dara		
☑ No	•			
Yes				
4.34			\$7,243.00	
Wells Far	go Card Services	Last 4 digits of account number	Ψ1,243.00	
Nonpriority C	reditor's Name	When was the debt incurred? 10/2002		
PO Box 1	Street	As of the date you file, the claim is: Check all that apply.		
		Contingent		
		Unliquidated		
Des Moin	es IA 50306	Disputed		
City	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:		
Debtor		Student loans		
Debtor	•	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Debtor	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts		
At least one of the debtors and another		Other. Specify		
Check if this claim is for a community debt		Credit Card		
	n subject to offset?			
✓ No ☐ Yes				

Debtor 1 Debtor 2	JOSE R MAR ARACELI G D		Z-CHICAS	Case number (if known)	
Part 2:	Your NON	PRIO	RITY Unsecui	red Claims Continuation Page	
After listing		this pa	age, number the	m sequentially from the	Total claim
4.35 WILLIAM	BVKED			Last 4 digits of account number	Unknown
Nonpriority Cr	reditor's Name			When was the debt incurred? 2019 As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated	
RENO NV 89533 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes		ZIP Code one.	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Attorney for -SILVIA LLOYD		

PENDING LAWSUIT AGAINST DEBTORS

Debtor 2 ARACELI G DIAZ Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$14,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$14,000.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$10,184.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. .	\$133,354.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$143,538.00

Fill in this inf	ormation to i	dentify your case	:
Debtor 1	JOSE	R	MARTINEZ-CHICAS
	First Name	Middle Name	Last Name
Debtor 2	ARACELI	G	DIAZ
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	r the: DISTRICT OF	NEVADA
Case number (if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

F	ill in this i	information to i	dentify your case	e:		
D	ebtor 1	JOSE	R		RTINEZ-CHICAS	
		First Name	Middle Name	Last	Name	
	ebtor 2 Spouse if filio	ng) ARACELI First Name	G Middle Name	DIA Last	AZ Name	-
U	nited States	Bankruptcy Court fo	r the: DISTRICT OF	NEVAD	Α	-
_	ase number known)					Check if this is an amended filing
	ficial Fo					
Sc	hedule	H: Your Code	ebtors			12/15
nee	eded, copy t ge. On the t	he Additional Page	, fill it out, and numb Il Pages, write your	per the ent	tries in the boxes o	correct information. If more space is in the left. Attach the Additional Page to this own). Answer every question. use as a codebtor.)
2.	include Ari	zona, California, Ida Go to line 3.		a, New Me	exico, Puerto Rico, To	ry? (Community property states and territories exas, Washington, and Wisconsin.)
	_	n which community s	state or territory did yo	ou live?	Nevada	Fill in the name and current address of that person.
		ARACELI G DIAZ				
	1	lame of your spouse, fo	rmer spouse, or legal equ	uivalent		
		7430 BAROQUE C Number Street	JOURI			
	-					
	_	SUN VALLEY City		NV State	89433 ZIP Code	<u> </u>
3.	In Column person sh creditor o	1, list all of your co own in line 2 again n Schedule D (Offic	as a codebtor only i	if that pers	r spouse as a codel son is a guarantor o (Official Form 106	otor if your spouse is filing with you. List the or cosigner. Make sure you have listed the E/F), or <i>Schedule G</i> (Official Form 106G). Use
	Column	1: Your codebtor				Column 2: The creditor to whom you owe the debt
						Check all schedules that apply:
3.		ELI GARCIA DIAZ				Schedule D, line
	— Name 7430 E	BAROQUE CT.				
	Number	Street				Schedule E/F, line 4.35
	SUN V	ALLEY, NV				Schedule G, line
	City		State	7IP (Code	WILLIAM BAKER

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Fill in this information to		MARTINEZ OLUGAG	
Debtor 1 JOSE First Name	R Middle Name	Last Name	Check if this is:
Debtor 2 ARACE	LI G	DIAZ _	
(Spouse, if filing) First Name		Last Name	An amended filing
United States Bankruptcy Cou	rt for the: DISTRICT OI	F NEVADA [A supplement showing postpetition chapter 13 income as of the following date
(if known)			MM / DD / YYYY
fficial Form 106l			
chedule I: Your Inco	ome		12/1
Part 1: Describe Emp	,	uestion.	
Fill in your employment	,		Debter 2 or non filing angues
Part 1: Describe Employment information. If you have more than one	,	Debtor 1 ✓ Employed	Debtor 2 or non-filing spouse ☐ Employed
Part 1: Describe Employment information. If you have more than one job, attach a separate page with information about	loyment	Debtor 1	
Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers.	loyment	Debtor 1 ☑ Employed	☐ Employed ☑ Not employed
Part 1: Describe Employment information. If you have more than one job, attach a separate page with information about	Employment status	Debtor 1 ☑ Employed ☐ Not employed	☐ Employed ☑ Not employed
Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal,	Employment status Occupation	Debtor 1 ☑ Employed ☐ Not employed	☐ Employed ☑ Not employed
Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it	Employment status Occupation Employer's name	Debtor 1 ☑ Employed ☐ Not employed SELF EMPLOYED- CONTRATOR	☐ Employed ☑ Not employed COMPANY CO

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

5. For Debtor 1 For Debtor 2 or non-filing spouse

2. \$0.00

\$0.00

\$0.00

Official Form 106l Schedule I: Your Income page 1

Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 ARACELI G DIAZ Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$0.00 \$0.00 List all payroll deductions: \$0.00 \$0.00 5a. Tax, Medicare, and Social Security deductions 5a \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5q. Union dues 5g. 5h. Other deductions. \$0.00 \$0.00 5h. + Specify: Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +6. \$0.00 \$0.00 5g + 5h.Calculate total monthly take-home pay. Subtract line 6 from line 4. \$0.00 \$0.00 List all other income regularly received: 8a. Net income from rental property and from operating a 8a \$3,952.33 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation \$0.00 8d \$0.00 8e. Social Security \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 8g. 8q. Pension or retirement income \$0.00 \$0.00 8h. Other monthly income. \$0.00 Specify: 8h. . \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$3,952.33 \$0.00 Calculate monthly income. Add line 7 + line 9. \$3,952.33 \$0.00 \$3,952.33 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$3,952.33 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? None.

Debtor 1 Debtor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ		Case number (if known)	
8a. Attach	ned Statement (Debtor 1)			
		CONSTRUCTION		
Gross Mo	onthly Income:			\$23,918.33
Expense		Category	Amount	
BUS. EXF	PS.		\$19,966.00	
Total Mo	nthly Expenses			\$19,966.00
Net Mont	thly Income:			\$3,952.33

Official Form 106l Schedule I: Your Income page 3

F	ill in this inform	ation to ide	entify	your case:			Cha	alc if this	in	
	Debtor 1	JOSE		R	MART	INEZ-CHICAS		ck if this An ame	ended filing	
		First Name		Middle Name	Last Na		🗇	A supp	lement showing	
	Debtor 2 (Spouse, if filing)	ARACELI First Name		G Middle Name	DIAZ Last Na	me		chapter followin	· 13 expenses as g date:	s of the
	United States Bankri	uptcy Court for	r the:	DISTRICT OF	NEVADA			MM / D	D / YYYY	_
	Case number (if known)									
Of	fficial Form 10	6J					•			
So	chedule J: Yo	ur Exper	ses							12/15
cor	rrect information. If me and case numbe	more space i r (if known).	is neede Answe	ed, attach anoth r every question	er sheet to t	ing together, both ar his form. On the top	-		-	
ŀ	art 1: Descri	be Your Ho	useho	old						
1.	Is this a joint case	?								
2.	No Yes	ebtor 2 live in Debtor 2 muendents?	ust file O		J-2, Expenses	s for Separate Housel	onship		Dependent's	Does dependent
	Do not list Debtor 1 Debtor 2.	and		r each depender		Debtor 1 or Debtor	2		age	live with you?
	Do not state the de names.	pendents'				SON				No Yes No Yes Yes
										No Yes No
										Yes No Yes
3.	Do your expenses expenses of peop yourself and your	le other than	i	✓ No □ Yes						
P	art 2: Estima	te Your On	aoina	Monthly Exp	oenses					
Est to i	timate your expense	es as of your of a date afte	bankrup r the ba	otcy filing date	unless you a	re using this form as supplemental Sche				
	lude expenses paid ch assistance and h		_		-				Your expens	es
4.	The rental or hom Include first mortga							2	4	\$1,853.00
	If not included in	line 4:								
	4a. Real estate ta	xes						4	1a	
	4b. Property, hom	eowner's, or r	enter's i	nsurance				4	4b	
	4c. Home mainter	nance, repair,	and upk	eep expenses				4	4c	\$100.00
	4d Homeowner's	association of	r condor	minium dues				,	1d	

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Debtor 1 JOSE R MARTINEZ-CHICAS Debtor 2 **ARACELI G DIAZ** Case number (if known) Your expenses Additional mortgage payments for your residence, such as home equity loans 5. 5. **Utilities:** 6. 6a. Electricity, heat, natural gas 6a. \$265.00 6b. Water, sewer, garbage collection 6b. \$100.00 6c. Telephone, cell phone, Internet, satellite, and 6c. \$130.00 cable services 6d. 6d. Other. Specify: 7. Food and housekeeping supplies 7. \$450.00 Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. \$150.00 10. Personal care products and services 10. \$80.00 11. Medical and dental expenses 11. 12. Transportation. Include gas, maintenance, bus or train \$125.00 12. fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. \$60.00 magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$140.00 15b. Health insurance 15b. 15c. Vehicle insurance \$70.00 15c. 15d. Other insurance. Specify: DAUGHTER'S AUTO INSURANCE 15d. \$80.00 **16.** Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: __ 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

Specify:

19. Other payments you make to support others who do not live with you.

19.

	tor 1 tor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ	Case number (if know	n)
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	. Specify:	21.	+
22.	Calcu	late your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$3,603.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$3,603.00
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,952.33
	23b.	Copy your monthly expenses from line 22c above.	23b. -	\$3,603.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$349.33
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you fil	e this form?	
	paym	cample, do you expect to finish paying for your car loan within the year or do you expent to increase or decrease because of a modification to the terms of your mortgage	, ,	
	=	Yes. Explain here: None.		

Fill in this inf	ormation to i	dentify your case	:
Debtor 1	JOSE First Name	R Middle Nome	MARTINEZ-CHICAS
Debtor 2	First Name ARACELI	Middle Name G	Last Name DIAZ
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	r the: DISTRICT OF	NEVADA
Case number (if known)			
(II KIIOWII)			
Official Form	106Sum		

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$63,194.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$63,194.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$23,983.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$14,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$143,538.00
	Your total liabilities	\$181,521.00
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,952.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,603.00

	otor 1 otor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ	Case number (if known)	
P	art 4:	Answer These Questions for Administrative and Statistic	cal Records	
5 .	Are y	ou filing for bankruptcy under Chapters 7, 11, or 13?		
	ш	No. You have nothing to report on this part of the form. Check this box and su	ubmit this form to the court with your	other schedules.
7.	What	kind of debt do you have?		
	Ľ	Your debts are primarily consumer debts. Consumer debts are those "incur amily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statist		personal,
		Your debts are not primarily consumer debts. You have nothing to report or his form to the court with your other schedules.	n this part of the form. Check this b	ox and submit
3.		the Statement of Your Current Monthly Income: Copy your total current mo	onthly income from	\$3,951.83
).	Сору	the following special categories of claims from Part 4, line 6 of <i>Schedule</i>	• E/F:	
			Total claim	
	From	Part 4 on Schedule E/F, copy the following:		
	9a. [Domestic support obligations. (Copy line 6a.)	\$0.00	
	9b. T	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$14,000.00	
	9c. C	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
	9d. S	Student loans. (Copy line 6f.)	\$10,184.00	
		Obligations arising out of a separation agreement or divorce that you did not repriority claims. (Copy line 6g.)	eport as \$0.00	
	9f F	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6b	+ \$0.00	

9g. Total. Add lines 9a through 9f.

\$24,184.00

Fill in this inf	ormation to i	dentify your case	:
Debtor 1	JOSE	R	MARTINEZ-CHICAS
	First Name	Middle Name	Last Name
Debtor 2	ARACELI	G	DIAZ
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court for	r the: DISTRICT OF	NEVADA
Case number			
(if known)			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NO	OT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have re true and correct.	ead the summary and schedules filed with this declaration and that they are
X /s/ JOSE R MARTINEZ-CHICAS	X /s/ ARACELI G DIAZ
JOSE R MARTINEZ-CHICAS, Debtor 1 Date 12/22/2020 MM / DD / YYYY	ARACELI G DIAZ, Debtor 2 Date 12/22/2020 MM / DD / YYYY

				•	
Fill in this inf	ormation to i	dentify your case:			
Debtor 1	JOSE	R	MARTINEZ-CHICAS		
	First Name	Middle Name	Last Name		
Debtor 2	ARACELI	G	DIAZ		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	the: DISTRICT OF	NEVADA		
Case number				☐ Check if this is an	
(if known)				amended filing	
Official Form	107				
		Affairs for Ind	ividuals Filing for B	ankruntev	04/19
	n i illaliciai	Allalis Ioi Illu	Ividuais i illiig ioi B	апктиртсу	0-7/13
correct information	on. If more space		separate sheet to this form. C	ooth are equally responsible for supplying On the top of any additional pages, write	
Part 1: Giv	ve Details Abo	out Your Marital S	tatus and Where You Li	ved Before	
1. What is your	current marital s	status?			
✓ Married		idido.			
☐ Not marri	ed				
2. During the la	st 3 years, have	you lived anywhere o	ther than where you live now	?	
☑ No					
Yes. List	all of the places	ou lived in the last 3 y	ears. Do not include where you	ı live now.	
		•	• .	ommunity property state or territory?	
,	property states and wisconsin.)	<i>d territorie</i> s include Ari	zona, California, Idaho, Louisia	na, Nevada, New Mexico, Puerto Rico, Texas,	

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

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		JOSE R MARTINEZ-CHICAS ARACELI G DIAZ					
P	art 2:	Explain the Sources of					
4.	Fill in th	u have any income from employs ne total amount of income you rece re filing a joint case and you have	eived from all jobs and all bu	sinesses, including par	t-time activities.	lendar years?	
	□ No ☑ Yes	s. Fill in the details.					
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
From January 1 of the current year until the date you filed for bankruptcy:		-	✓ Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips		
			Operating a business		Operating a business		
		calendar year:	Wages, commissions, bonuses, tips		₩ages, commissions, bonuses, tips		
(Jar	nuary 1 to	December 31, 2019) YYYY	Operating a business		Operating a business		
For	the cale	ndar year before that:	Wages, commissions, bonuses, tips	\$75,393.00	₩ Wages, commissions, bonuses, tips		
(Jar	nuary 1 to	December 31, 2018)	Operating a business		Operating a business		
5.	5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.						
	List ead	ch source and the gross income from	om each source separately.	Do not include income	that you listed in line 4.		
	☑ No	s. Fill in the details.					

	otor 1 otor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ			Case number (if kno	own)
Part 3: List Certain Payments You Made Before You Filed for Bankruptcy						
6.	Are eith	ner Debtor 1's or Debtor 2's debts prima			. ,	
	□ No.	·	-		mer debts are define	ed in 11 U.S.C. § 101(8) as
	ш	"incurred by an individual primarily for a	-			3 (,)
		During the 90 days before you filed for	bankruptcy, di	id you pay any credit	or a total of \$6,825	or more?
		No. Go to line 7.				
		Yes. List below each creditor to who total amount you paid that crechild support and alimony. Al	ditor. Do not i	include payments for	domestic support of	obligations, such as
		* Subject to adjustment on 4/01/22 and	every 3 years	after that for cases	filed on or after the	date of adjustment.
	∀ Yes	Debtor 1 or Debtor 2 or both have pri	imarily consu	ımer debts.		
		During the 90 days before you filed for	bankruptcy, di	id you pay any credit	or a total of \$600 or	· more?
		☐ No. Go to line 7.				
		Yes. List below each creditor to wh creditor. Do not include payments Also, do not include payments	ents for dome to an attorne Dates of	estic support obligatic y for this bankruptcy Total amount	ons, such as child s case. Amount you	
MΑ	RLON D	DIAZ	payment	paid \$7,000.00	still owe \$0.00	
Cred	ditor's name		11/20	<u> </u>		Car
	NO, NV nber Stre	eet	-			☐ Credit card ☐ Loan repayment
			-			Suppliers or vendors
City		State ZIP Code	_			Other
7.	Insiders corporat agent, ir such as	1 year before you filed for bankruptcy, of include your relatives; any general partnetions of which you are an officer, director, including one for a business you operate as child support and alimony.	ers; relatives of person in cont	f any general partner rol, or owner of 20%	rs; partnerships of vor more of their vot	which you are a general partner; ing securities; and any managing
	✓ No ☐ Yes	s. List all payments to an insider.				
8.		1 year before you filed for bankruptcy, d ed an insider?	lid you make	any payments or tra	ansfer any propert	y on account of a debt that
	Include	payments on debts guaranteed or cosigne	ed by an inside	er.		
	✓ No ☐ Yes	s. List all payments that benefited an insid	er.			

Debtor 1 JOSE R MARTINEZ-C ARACELI G DIAZ Part 4: Identify Legal Acti			-CHICAS Case number (if known)					
			ons, Repossessions, and Foreclo	sures				
9.	Within List all smodification	1 year before you filed fo	r bankruptcy, were you a party in any law rsonal injury cases, small claims actions, div	suit, court action				rustody
Case title WELLS FARGO BANK, NA, VS. JOSE MARTINEZ-CHICAS			Nature of the case DEBT COLLECTION	Court or agency JUSTICE COU Court Name 1675 E. PRATE Number Street	RT, SPARKS	TOWNSHIP		Pending On appeal
Cas	e numbe	er		SPARKS, City	NV State	89434 ZIP Code	_ 🗆 -	Concluded
Case title SILVIA LLOYD VS. ARACELI DIAZ AND JOSE ROBERTO MARTINEZ CHICAS		JOSE ROBERTO	Nature of the case COMPLIANT- CIVIL TRANSACTION	IN THE SECOND JUDICIAL DISTRICT COURT Court Name				the case Pending On appeal
Cas	e numbe	er CV20-01831		75 COURT STREET Number Street			- 🗖	Concluded
				RENO City	NV State	89501 ZIP Code	-	
10.	seized, Check a	or levied? all that apply and fill in the Go to line 11.		epossessed, fore	closed, garnis	hed, attached	,	
11.	Within		elow. for bankruptcy, did any creditor, includin refuse to make a payment because you o	-	cial institution	, set off any		
	☑ No □ Yes	s. Fill in the details.						
12.		•	r bankruptcy, was any of your property in eiver, a custodian, or another official?	the possession	of an assigne	e for the bene	iit of	
	✓ No ☐ Yes	5						

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Debtor 1 Debtor 2		JOSE R MARTINEZ-CHICAS ARACELI G DIAZ Case number (if known)										
Р	art 5:	List Cer	List Certain Gifts and Contributions									
13.	Within	2 years befo	re you f	iled for bankru	uptcy, did you give any	gifts with a total value of me	ore than \$600 per pers	on?				
	✓ No ☐ Yes	. Fill in the d	letails fo	or each gift.								
14.	. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?							an \$600				
	✓ No	s. Fill in the d	letails fo	or each gift or co	ontribution.							
P	art 6:	List Cer	tain Lo	osses								
15.		1 year before isaster, or g	-	-	otcy or since you filed	for bankruptcy, did you lose	anything because of the	neft, fire,				
	✓ No ☐ Yes	. Fill in the d	letails.									
P	art 7:	List Cer	tain Pa	ayments or	Transfers							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.											
	□ No ✓ Yes	. Fill in the d	letails.									
T I	0	CC C NI- (D	7-11 14-1	Description and valu	e of any property transferred	Date payment or transfer was	Amount of payment				
	on Who W		nan K.	Zeltzer, Ltd	-		made	paymont				
232 Num	Court Str				-							
Rei	10		NV State	89501 ZIP Code	-			-				
Ema	il or websit	e address			-							
Doro	on Who M	lada tha Dayma	nt if Not	Vou	-							
		lade the Payme			otcy, did you or anvon	e else acting on your behalf :	pay or transfer any pro	perty to				
17. Within 1 year before you filed for bankruptcy, did you anyone who promised to help you deal with your cre Do not include any payment or transfer that you listed or					vith your creditors or to			,				
Do not include any payment or transfer that you listed o ☑ No ☐ Yes. Fill in the details.												

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	tor 1 tor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ	Case number (if known)
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwi ry transferred in the ordinary course of your business or financial affa	
		both outright transfers and transfers made as security (such as granting of include gifts and transfers that you have already listed on this statement.	f a security interest or mortgage on your property).
	✓ No ☐ Yes	s. Fill in the details.	
19.		10 years before you filed for bankruptcy, did you transfer any propert a beneficiary? (These are often called asset-protection devices.)	y to a self-settled trust or similar device of which
	✓ No ☐ Yes	s. Fill in the details.	
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe Dep	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or, closed, sold, moved, or transferred?	instruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates, pension funds, cooperatives, associations, and other financial institutions	•
	✓ No	s. Fill in the details.	
21.	•	now have, or did you have within 1 year before you filed for bankrupturities, cash, or other valuables?	cy, any safe deposit box or other depository
	✓ No ☐ Yes	s. Fill in the details.	
22.	-	ou stored property in a storage unit or place other than your home wit	thin 1 year before you filed for bankruptcy?
	✓ No	s. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Els	e
23.	-	hold or control any property that someone else owns? Include any p in trust for someone.	roperty you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	

Debtor 1 Debtor 2		JOSE R MART ARACELI G DI		s	Case number (if known)			
Part 10: Give Details About Env			s About Env	vironmental Information				
For	the purp	ose of Part 10, t	he following d	lefinitions apply:				
	hazardoι	is or toxic substa	ance, wastes,	· · · · · · · · · · · · · · · · · · ·	cerning pollution, contamination, releases of ce water, groundwater, or other medium, wastes, or material.			
			• • •	operty as defined under any environmen lize it, including disposal sites.	ntal law, whether you now own, operate, or			
				n environmental law defines as a hazard nt, contaminant, or similar item.	dous waste, hazardous substance, toxic			
Rej	oort all ne	otices, releases,	and proceedi	ngs that you know about, regardless of	when they occurred.			
24.	Has any law?	y governmental ı	unit notified ye	ou that you may be liable or potentially	liable under or in violation of an environmental			
25.	✓ No							
26.	_			ial or administrative proceeding under any environmental law? Include settlements and				
	✓ No ☐ Yes	. Fill in the detail	S.					
P	art 11:	Give Details	S About You	ur Business or Connections to A	ny Business			
27.	Within 4		ou filed for ba	nkruptcy, did you own a business or ha	ve any of the following connections to any			
	 ✓ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ✓ A member of a limited liability company (LLC) or limited liability partnership (LLP) ✓ A partner in a partnership ✓ An officer, director, or managing executive of a corporation ✓ An owner of at least 5% of the voting or equity securities of a corporation 							
		None of the abo		o to Part 12. d fill in the details below for each busines:	5.			
		CES NORTHER	N NEVADA	Describe the nature of the business CONTRACTOR/ HANDY MAN	Employer Identification number Do not include Social Security number or ITIN.			
Pusiness Name 7430 BAROQUE COURT Number Street			Name of accountant or bookkeeper	EIN:				
SUN VALLEY NV 89433 City State ZIP Code					From <u>4/2018</u> To <u>PRESENT</u>			

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Debtor 1 Debtor 2	JOSE R MARTINEZ-CHICA ARACELI G DIAZ	AS .			Cas	e numbe	r (if known)		
CORAZON Business Nam	I A CORAZON BEHAVIOR I			of the business H ASSISTANC	E		er Identifica include Soc		nber ity number or ITIN.
	OQUE COURT	Name of sees		au haakkaanau		EIN:			
	reet	Name of acco	untant	or bookkeeper		Dates b	ousiness ex	sted	
						From	1/2018	То	2/2020
SUN VALL	EY NV 89433 State ZIP Code					_	1/2010		
	2 years before you filed for bancial institutions, creditors, or			e a financial stat	ement to	o anyone	e about you	r busines	s? Include
✓ No ☐ Yes	s. Fill in the details below.								
Part 12:	Sign Below								
that answer	the answers on this Statements are true and correct. I under fraud in connection with a ball. U.S.C. §§ 152, 1341, 1519, and	rstand that ma nkruptcy case	king a fa	alse statement,	conceal	ing prop	erty, or obta	aining mo	oney or
X /s/ JOS	E R MARTINEZ-CHICAS	х	/s/ AR	ACELI G DIAZ					
	MARTINEZ-CHICAS, Debtor 1			ELI G DIAZ, Debte	or 2				
Date _	12/22/2020		Date _	12/22/2020	_				
Did you atta	ach additional pages to <i>Your</i> S	tatement of Fil	nancial ,	Affairs for Indivi	duals Fi	ling for l	Bankruptcy	(Official I	Form 107)?
✓ No ☐ Yes									
Did you pay	or agree to pay someone wh	o is not an atto	rney to	help you fill out	bankruj	ptcy forn	ns?		
☑ No									
Yes. Na	ame of person					_		-	ion Preparer's Notice, (Official Form 119).

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

In re JOSE R MARTINEZ-CHICAS **ARACELI G DIAZ**

Case No.		
Chapter	13	

			•				
	DISCLOSUR	E OF COMPENSATION OF ATTORNE	Y FOR DEBTOR				
1.	1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) a that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy cas is as follows:						
	For legal services, I have agreed	d to accept	\$4,000.00				
	Prior to the filing of this statemen	nt I have received	\$2,000.00				
	Balance Due		\$2,000.00				
2.	2. The source of the compensation	paid to me was:					
	✓ Debtor	Other (specify)					
3.	3. The source of compensation to b	pe paid to me is:					
	✓ Debtor	Other (specify)					
4.	 I have not agreed to share the associates of my law firm. 	he above-disclosed compensation with any other pe	rson unless they are members and				
		above-disclosed compensation with another person of a copy of the agreement, together with a list of the na					
5.	5. In return for the above-disclosed	fee. I have agreed to render legal service for all asp	ects of the bankruptcy case, including:				

- ng:
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

 12/22/2020
 /s/ Nathan R. Zeltzer
 Bar No. 5173

 Date
 Nathan R. Zeltzer
 Bar No. 5173

 The Law Office of Nathan R. Zeltzer, Ltd.
 232 Court St.

 Reno, NV 89501
 Phone: (775) 786-9993 / Fax: (775) 329-7220

/s/ JOSE R MARTINEZ-CHICAS	/s/ ARACELI G DIAZ		
JOSE R MARTINEZ-CHICAS	ARACELI G DIAZ		

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

IN RE: JOSE R MARTINEZ-CHICAS

ARACELI G DIAZ

CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her

know	rledge.		
Date	12/22/2020	Signature	/s/ JOSE R MARTINEZ-CHICAS JOSE R MARTINEZ-CHICAS
Date	12/22/2020	Signature	/s/ ARACELI G DIAZ

ARACELI G DIAZ

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Debtor(s): JOSE R MARTINEZ-CHICAS
ARACELI G DIAZ

Case No:
Chapter: 13

Case No:
RENO DIVISION

Aargon Agency CHECK CITY HATCH CARD

8668 Spring Mountains Road 10590 N. MCCARRAN BLVD 1750 HARDY OAK STE. 104

Las Vegas, NV 89117 RENO, NV 89503 ITHACA, NE 68033

ALDOUS AND ASSOCIATES CITICARDS CBNA Hospital Collection Services

PO BOX 171374 PO BOX 6241 PO BOX 872

SALT LAKE CITY IIT 84117 IBS CDV DISPUTES RENO. NV 89504

SALT LAKE CITY, UT 84117 IBS CDV DISPUTES RENO, NV 89504 SIOUX FALLS, SD 57117

AMSHERCOLLECTIONSERVICES COMENITYBANK/VICTORIASSECRET IRS

4524 SOUTHLAKE PARKWAY STE. 15 PO BOX 182789 PO Box 7346

BIRMINGHAM, AL 35243 COLUMBUS, OH 43218 Philadelphia, PA 19101

ARACELI GARCIA DIAZ COX COMMUNICATIONS JOSEPH A. GELLER, ESQ.

7430 BAROQUE CT. PO BOX 1259 823 LAS VEGAS BLVD. S., SUITE 2

SUN VALLEY, NV OAKS, PA 19456 LAS VEGAS, NV 89101 89433

BARCLAYS BANK DELAWARE Credit One Bank MIDLAND CREDIT MANAGEMENT

PO BOX 8803 PO Box 98872 PO BOX 51319

WILMINGTON, DE 19899 Las Vegas, NV 89193 LOS ANGELES, CA 90051

BB&T DEPT OF ED/NAVIENT NEVADA MEDICAID PO BOX 1704 123 JUSTISON STREET 3RD FLOOR PO BOX 30042

CLEMMONS, NC 27012 WILMINGTON, DE 19801 RENO, NV 89520

Capital One Discover Financial Services Northern Nevada Medical Center

PO Box 30285 PO BOX 15316 PO BOX 740433

Salt Lake City, UT 84130 WILMINGTON, DE 19850 LOS ANGELES, CA 90074

CASH 1 LOANS DIVERSIFIED ADJ SVC ONLINE INFORMATIO SERVICES

5890 S. VIRGINIA BLDG. 1 600 COON RAPIDS BLVD NW PO BOX 1489

RENO, NEVADA 89502 COON RAPIDS, MN 55433 WINTERVILLE, NC 28590

Cavalry Portfolio Services First Premier Bank PLAIN GREEN LOANS 500 Summit Lake Drive, STe 400 3820 N LOUISE AVE. 93 MACK ROAD STE. 600

Valhalla, NY 10595 SIOUX FALLS, SD 57107 BOX ELDER, MT 59521

CB INDIGO/GF FLEXIABLITY CAPITAL RESURGENT/LVNV FUNDING PO BOX 4499 1501 BROADWAY STE. 1511 PO BOX 3038

PO BOX 4499 1501 BROADWAY STE. 1511 PO BOX 3038
BEAVERTON, OR 97076 NEW YORK, NY 10036 EVANSVILLE, IN 47730

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Debtor(s): JOSE R MARTINEZ-CHICAS Case No: DISTRICT OF NEVADA
ARACELI G DIAZ Chapter: 13 RENO DIVISION

SECURITY FINANCE PO BOX 1893 SPARTANBURG, SC 29304

SYNCB/CHEVRON PO Box 965015 Orlando, FL 32896

THE BANK OF MISSOURI PO BOX 85710 SIOUX FALLS, SD 57118

United Federal Credit Union 2807 S. State Street Saint Joseph, MI 49085

UPLIFT INC. 801 EL CAMINO REAL MENLO PARK, CA 94025

US BANK PO BOX 108 SAINT LOUIS, MO 63166

Wells Fargo Card Services PO Box 10347 Des Moines, IA 50306

WILLIAM BAKER PO BOX 33354 RENO, NV 89533

Fill in this i	nformation to ic	dentify your case:		Check as directed in lines 17 an	d 21
Debtor 1	JOSE First Name	R Middle Name	MARTINEZ-CHICAS Last Name	According to the calculations required by Statement:	this
Debtor 2 Spouse, if filin	g) ARACELI g) First Name	G Middle Name	DIAZ Last Name	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).	t
		the: DISTRICT OF N	EVADA	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).	
Case number if known)				3. The commitment period is 3 years.	
i Kilowii)				4. The commitment period is 5 years.	
fficial For	m 122C-1			☐ Check if this is an amended filing	
		of Your Current nmitment Period	Monthly Income		(
What is yo	ur marital and filing	status? Check one on	ly.		
Part 1: C	Calculate Your A	verage Monthly In	come		
What is yo	ur marital and filing	status? Check one on	ly.		
☐ Not m	arried. Fill out Colui	mn A, lines 2-11.			
 Marrie	ed. Fill out both Colu	umns A and B, lines 2-1	1.		
bankruptcy August 31. in the result	r case. 11 U.S.C. § If the amount of you. Do not include any	101(10A). For example or monthly income varied y income amount more t	e, if you are filing on Septem d during the 6 months, add th	during the 6 full months before you file this per 15, the 6-month period would be March 1 the income for all 6 months and divide the total of the spouses own the same rental property, put ine, write \$0 in the space.	by 6.
				Column A Column B Debtor 1 Debtor 2 or non-filing spouse	
_	wages, salary, tips payroll deductions).	s, bonuses, overtime, a	and commissions	\$0.00	
Alimony ar	nd maintenance pay	yments. Do not include	payments from a spouse.	\$0.00 \$0.00	
All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.			<u>\$0.00</u> <u>\$0.00</u>		
Net income	e from operating a l	business, profession, o	or farm		
		Debtor 1	Debtor 2		
Gross recei deductions)	pts (before all	\$23,918.33	<u>\$0.00</u>		
		ng – \$19,966.50			

expenses

profession, or farm

Net monthly income from a business,

\$0.00 Copy here →

\$3,951.83

\$0.00

\$3,951.83

	otor 1 otor 2	JOSE R MARTINEZ-CH ARACELI G DIAZ	ICAS		c	ase number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spous	e
6.	Net in	come from rental and other	real property					
			Debtor 1	Debtor 2				
	Gross deduc	receipts (before all tions)	\$0.00	\$0.00				
	Ordina	ary and necessary operating ses		\$0.00	Сору			
	Net mo	onthly income from rental or real property	\$0.00	\$0.00	here →	\$0.00	\$0.00	
7.	Intere	st, dividends, and royalties				\$0.00	\$0.00	
8.	Unem	ployment compensation				\$0.00	\$0.00	
		t enter the amount if you conte t under the Social Security Ac						
	Foi	r you		\$0.	00			
	Foi	r your spouse		\$0.	00			
	disabil uniforr of title amour	nce paid by the United States lity, combat-related injury or di med services. If you received 10, then include that pay only at of retired pay to which you wany provision of title 10 other	sability, or death of a any retired pay paid to extent that it does would otherwise be er	n member of the under chapter 61 is not exceed the ntitled if retired				
10.	amour payme declar (50 U.: (COVI humar pay, a conne- memb	ne from all other sources not not. Do not include any benefits that made under the Federal layed by the President under the S.C. 1601 et seq.) with respect D-19); payments received as inity, or international or domest nouity, or allowance paid by the ction with a disability, combater of the uniformed services are page and put the total belocate.	s received under the aw relating to the nati National Emergencies to the coronavirus of a victim of a war crimic terrorism; or comple United States Goverelated injury or disal If necessary, list other	Social Security A ional emergency es Act disease 2019 he, a crime agains ensation, pension ernment in bility, or death of	ct; st n,			
	Total a	amounts from separate pages.	, if any.				+	
11.		late your total average mont nes 2 through 10 for each colu				\$3,951.83	+ \$0.00	= \$3,951.83
	Then a	add the total for Column A to t	he total for Column B	3.	L		L	Total average monthly income
В	art 2:	Determine How to M	leasure Vour Do	ductions from	n Income	2		
								\$3,951.83
12.	Сору	your total average monthly i	ncome from line 11.	•				40,301.00

	tor 1 tor 2		JOSE R MARTINEZ-CHICAS ARACELI G DIAZ	Case numb	per (if known)	
13.	Calc	- culat	e the marital adjustment. Check one:		· /	
		You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.				
		If th	is adjustment does not apply, enter 0 below.			
			a)		Copy here -	\$0.00
			rent monthly income. Subtract the total in line			\$3,951.83
15.			e your current monthly income for the year. opy line 14 here	•		\$3,951.83
			ultiply line 15a by 12 (the number of months in a			X 12
	15b.	. Th	e result is your current monthly income for the y	year for this part of the form		\$47,421.96
16.	Calc	culat	e the median family income that applies to yo	ou. Follow these steps:		
	16a.	. Fil	I in the state in which you live.	Nevada		
	16b.	. Fil	I in the number of people in your household.	3		
	16c.	To	I in the median family income for your state and find a list of applicable median income amount structions for this form. This list may also be av	ts, go online using the link specified in	the separate	\$76,591.00
17.	How	/ do	the lines compare?			
	17a.	. ▼	Line 15b is less than or equal to line 16c. Or under 11 U.S.C. § 1325(b)(3). Go to Part 3.			
	17b.		Line 15b is more than line 16c. On the top of 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill On line 39 of that form, copy your current mo	out Calculation of Your Disposable		
P	art 3	:	Calculate Your Commitment Period	Under 11 U.S.C. § 1325(b)(4)		
18.	Сор	у уо	ur total average monthly income from line 11			\$3,951.83
19.	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.					
	19a.	. If	the marital adjustment does not apply, fill in 0 or	n line 19a		\$0.00
	19b. Subtract line 19a from line 18.					\$3,951.83

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	tor 1 tor 2	JOSE R MARTINEZ-CHICAS ARACELI G DIAZ	Case number (if known)	
20.	Calculate your current monthly income for the year.		Follow these steps:	
	20a.	Copy line 19b		\$3,951.83
		Multiply by 12 (the number of months in a year).		X 12
	20b.	. The result is your current monthly income for the y	year for this part of the form.	\$47,421.96
	20c.	Copy the median family income for your state and	size of household from line 16c.	\$76,591.00
21.	How	v do the lines compare?		
Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, <i>The commitment period is 3 years</i> . Go to Part 4.				
		Line 20b is more than or equal to line 20c. Unless of this form, check box 4, <i>The commitment period is</i>		
Pa	art 4	Sign Below		
	By s	signing here, under penalty of perjury I declare that th	ne information on this statement and in any attachments is true and	correct.
	X /	s/ JOSE R MARTINEZ-CHICAS	X /s/ ARACELI G DIAZ	
	J	JOSE R MARTINEZ-CHICAS, Debtor 1	ARACELI G DIAZ, Debtor 2	
	[Date 12/22/2020	Date 12/22/2020	
		MM / DD / YYYY	MM / DD / YYYY	

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.